

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 or Fax (703) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notifications of maintenance fees will be mailed to the current correspondence address as indicated, unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESSE" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Leave this block 1 unless change of address)

22384 7500 133762005

NAVAL RESEARCH LABORATORY
 ASSOCIATE COUNSEL (PATENTS)
 CODE 1003.2
 4555 OVERLOOK AVENUE, S.W.
 WASHINGTON, DC 20375-5320

Note: A certificate of mailing can only be used for domestic mailings of the PTO's Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this (the) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 273-2885, on the date indicated below.

(Depositor's name)

Signature

Date

APPLICATION NO.	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONTRACTS FROM 103
16734,241	12/15/2003	GILL LEE	NC 95, 996	3269

TITLE OF INVENTION: NANOPOROUS MEMBRANE IMMUNOSENSOR

APPLN TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	INITIAL FILING FEE	DATE DUE
non provisional	NO	\$1400	\$1400	\$1760	03/07/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
COUNTS, GARY W.	1641	433-287280

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.263).	2. For printing on the patent front page, list (1) the name of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	3. Gary L. Ressing
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence address from PTO/SB/122) attached.		2. John L. Kavarnack
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev. 02-02 or more recent) attached. Use of a Customer Number is required.		3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type):

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: UNITED STATES OF AMERICA (B) RESIDENCE: (CITY AND STATE OR COUNTRY)
 AS REPRESENTED BY THE SECRETARY OF THE
 NAVY

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4. The following fee(s) are enclosed:	<input type="checkbox"/> Payment of fees.
<input type="checkbox"/> Issue Fee	<input type="checkbox"/> A check in the amount of the fee(s) is enclosed.
<input type="checkbox"/> Publication Fee (No small entity discount permitted)	<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.
<input type="checkbox"/> Advance Order - # of Copies _____	<input type="checkbox"/> The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0281. (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)	<input type="checkbox"/> Applicant claims SMALL ENTITY status. See 37 CFR 1.27	<input type="checkbox"/> Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(2).
--	--	--

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to reapply any previously paid fee set forth in the application identified above. NOTE: The Issue Fee and Publication Fee (if any) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest, as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Amyle Ressing

Date April 6, 2006

Typed or printed name Amyle L. Ressing

Registration No. 45,834

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (or by the USPTO by process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments or the amount of time you require to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.